

TRAINING LOG

NAME: _____ **Year:** _____

DATE	REQUIRED AREA	TRAINING DESCRIPTION	TRAINER NAME AND ORGANIZATION	HRS
	principles of good nutrition:			
	proper hand washing, OSHA requirements, sanitation techniques			
	procedures in administration of medication			
	recognizing early signs of illness and exclusion from the facility			
	accident prevention and safety principles			
	reporting requirements for communicable and infectious diseases			
	reporting requirements for abuse, neglect and exploitation			
	positive guidance / management of children			
	preventing Shaken Baby Syndrome: (if the center provides infant care)			
	preventing Sudden Infant Death Syndrome: (if the center provides infant care)			
	coping with crying babies: (if the center provides infant care)			
	development of the brain: (if the center provides infant care)			